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CENTRAL FAX CENTER****JUL 06 2006****To:** Examiner Alyssa M. Alter**From:** Travis K. Laird**Fax:** (571) 273-8300**Pages:** 18 pages including coversheet**Phone:****Date:** July 6, 2006**Re:** Serial No. - 10/642,851

☒ **Urgent** ☒ **For Review** ☐ **Please Comment** ☐ **Please Reply** ☐ **Please Recycle**

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2. Certificate of Transmission (1 page)
3. Transmittal Letter for Response/Amendment with Duplicate Copy (2 pages)
4. Amendment (14 pages)

• 10653 S. River Front Pkwy., Suite 150, South Jordan, UT 84095 Tel: (801) 572-0185 Fax: (801) 572-7666 •
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PAGE 1/18 * RCVD AT 7/6/2006 3:41:41 PM [Eastern Daylight Time] * SVR:USPTO-EFAX-3/4 * DNIS:2738300 * CSID:18015727666 * DURATION (mm-ss):04:42

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AB-334U

Serial No.: 10/642,851

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Patent Application: Anne M. Pianca et al.

Confirmation No.: 3762

Application No.: 10/642,851

Examiner: ALTER, Alyssa M.

Filed: August 18, 2003

Title: "System and Method for Insertion of
a Device into the Brain"RECEIVED
CENTRAL FAX CENTER
JUL 08 2006Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450TRANSMITTAL LETTER FOR RESPONSE/AMENDMENT

Sir:

Transmitted herewith is/are the following in the above-identified application:

- (X) Response/Amendment () Petition to extend time to respond
 (X) New fee as calculated below () Supplemental Declaration
 () No additional fee () Other: _____

CLAIMS AS AMENDED BY A LARGE ENTITY						
FOR	CLAIMS REMAINING AFTER AMENDMENT	NUMBER EXTRA	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA	RATE	ADDITIONAL FEES
TOTAL CLAIMS	17	MINUS	24	= 0	X \$50.00	\$0.00
INDEP. CLAIMS	5	MINUS	3	= 2	X \$200.00	\$400.00
[] FIRST PRESENTATION OF A MULTIPLE DEPENDANT CLAIM					+ \$360.00	\$
EXTENSION FEE	[] 1ST MONTH \$120.00	[] 2ND MONTH \$450.00	[] 3RD MONTH \$1020.00	[] 4TH MONTH \$1590.00		\$0.00
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$400.00

Please charge \$400.00 to Deposit Account 18-0013/40328-0054. At any time during the pendency of this application, please charge any fees required or credit any overpayment to Deposit Account 18-0013/40328-0054 pursuant to 37 CFR 1.25. Additionally please charge any fees to Deposit Account 18-0013/40328-0054 under 37 CFR 1.16, 1.17, 1.19, 1.20 and 1.21. A duplicate of this sheet is enclosed.

I hereby certify that this correspondence is being transmitted to the US Patent and Trademark Office via facsimile number (571) 273-8300 on July 6, 2006

Number of pages transmitted: 18

Signature: 

Rebecca R. Schow

Respectfully submitted,

By: 

Travis K. Laird (Reg. No.: 55,351)
 Attorney/Agent for Applicant(s)
 Telephone No.: (801) 572-8066
 Date: July 6, 2006

AB-334U

DUPLICATE

Serial No.: 10/642,851

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

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EXTENSION FEE	[] 1ST MONTH \$120.00	[] 2ND MONTH \$450.00	[] 3RD MONTH \$1020.00	[] 4TH MONTH \$1580.00		\$0.00
OTHER FEES						\$
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$400.00

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By: 

Travis K. Laird (Reg. No.: 55,351)
 Attorney/Agent for Applicant(s)
 Telephone No.: (801) 572-8066
 Date: July 6, 2006

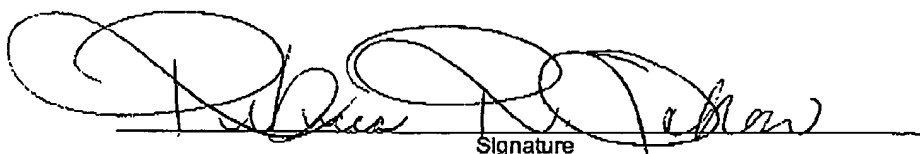
Application No.: 10/642,851

Attorney Docket No.: AB-334U

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Rebecca R. Schow

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10/642,851

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Anne M. Pianca et al.

Application No. 10/642,851

Filed: August 18, 2003

For: System and Method for Insertion
of a Device into the Brain

Group Art Unit: 3762

Examiner: ALTER, Alyssa M.

AMENDMENT

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Dear Commissioner:

In response to the final Official Action mailed on April 7, 2006, please consider the following:

07/07/2006 HNGUYEN1 00000116 180013 10642851
01 FC:1201 400.00 DA